

Receipt

#10
m.m.
1/23/02

Practitioner's Docket No. U-014297-5

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

TECH CENTER 1600/2900

DEC 04 2002

RECEIVED

In re application of: Yuhpyng L. CHEN

Serial No.: 09/583,372

Group No.: 1646

Filed: May 31, 2000

Examiner: D. Jones

For: CORTICOTROPIN RELEASING FACTOR ANTAGONISTS

Assistant Commissioner for Patents
Washington, DC 20231

REQUEST FOR CORRECTED FILING RECEIPT

1. Attached is a copy of the official filing receipt received from the PTO in the above application for which issuance of a corrected filing receipt is respectfully requested.

2. There is an error with respect to the following data, which is:

[X] incorrectly entered

and/or

[] omitted.

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8a)

I hereby certify that this correspondence is, on the date shown below, being:

MAILING

FACSIMILE

☒ deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

☐ transmitted by facsimile to the Patent and Trademark Office.

Date: November 18, 2002

Signature

JOHN RICHARDS

(type or print name of person certifying)

Error in**Correct data**

- | | | |
|--------|-----------------------------|--|
| 1. [] | Applicant's name | 1. |
| 2. [] | Applicant's address | 2. |
| 3. [] | Title | 3. |
| 4. [] | Filing Date | 4. |
| 5. [] | Serial Number | 5. |
| 6. [] | Foreign/PCT Application Re: | 6. |
| 7. [X] | Other ATTORNEY DOCKET NO. | 7. Delete "PC8605F" and Insert -- U-014297-5-- |

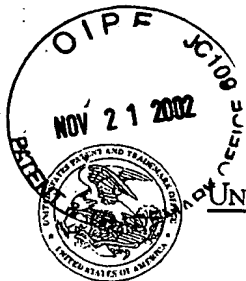

SIGNATURE OF PRACTITIONER**JOHN RICHARDS***(Type or print name of practitioner)*

Reg. No. 31,053

Tel. No.: (212) 708-1915

P.O. Address
c/o Ladas & Parry
26 West 61 Street
New York, NY 10023

Customer No. 00140



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/583,372	05/31/2000	1646	976	PC8605F		8	5

23913
PFIZER INC
235 E 42ND STREET
NEW YORK, NY 10017

FILING RECEIPT



OC000000005483623

Date Mailed: 10/18/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Yuhpyng L. Chen, Waterford, CT ;

Continuing Data as Claimed by Applicant

THIS APPLICATION IS A CIP OF 08/741,066 10/30/1996
WHICH CLAIMS BENEFIT OF 60/006,333 11/08/1995

Foreign Applications

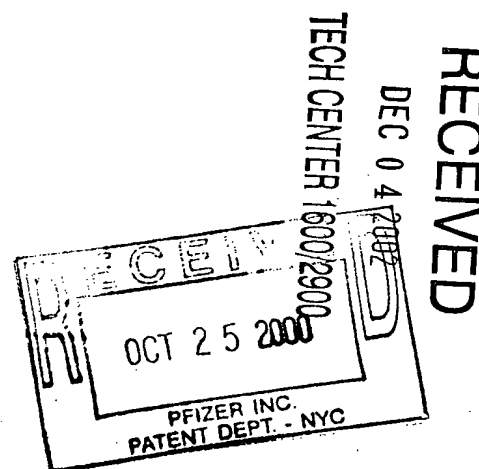
If Required, Foreign Filing License Granted 08/08/2000

Title

Corticotropin releasing factor antagonists

Preliminary Class

530



Data entry by : DILLON, LAWANDA

Team : OIPE

Date: 10/18/2000





FILE COPY

Commissioner for Patents
Washington, DC 20231
www.uspto.gov



CONFIRMATION NO. 4427

Bib Data Sheet

SERIAL NUMBER 09/583,372	FILING DATE 05/31/2000 RULE	CLASS 514	GROUP-ART UNIT 1614	ATTORNEY DOCKET NO. U-014297-5
APPLICANTS Yuhpyng L. Chen, Waterford, CT;				
** CONTINUING DATA ***** This application is a CIP of 08/741,066 10/30/1996 PAT 6,403,599 which claims benefit of 60/006,333 11/08/1995				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/08/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance		STATE OR COUNTRY CT	SHEETS DRAWING	TOTAL CLAIMS 8
Verified and Acknowledged Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 5		
ADDRESS Ladas & Parry 26 West 61st Street New York, NY 10023				
TITLE Corticotropin releasing factor antagonists				
FILING FEE RECEIVED 976	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____	